

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
fee DETERMINATION	mesay	12	8/20/01
OLP/E. CLASSIFIER			
FORMALITY REVIEW	Amid	690	10-01-01
RESPONSE FORMALITY REVIEW	apl	1090	12-6-01

INDEX OF CLAIMS

✓ _____ Rejected N _____ Non-elected
 □ _____ Allowed I _____ Interference
 - (Through numeral)... Cancelled A _____ Appeal
 + _____ Restricted O _____ Objected

Claim	Final	Original	Date
1	1	1	6-20-01
2	2	2	6-20-01
3	3	3	6-20-01
4	4	4	6-20-01
5	5	5	6-20-01
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If more than 150 claims or 10 actions
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